

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0290024	CAMP JEWELL-HIDEAWAY			NC	100	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
73 MCCLAVE ROAD				4			
Towns Served: COLEBROOK							

### Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

### Monthly Water System Facility (WSF) Level Monitoring Requirements

Water System Facility: **ENTRY POINT (WSFID: 00700)**

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
pH	Entry Point pH Monitoring (PHRD)	Minimum: 7.0 PH	4
Start Date: 4/1/2008			
		Compliance History: Monitoring Period	Monitoring Compliance Status:
		11/1/2018 - 11/30/2018	N
		12/1/2018 - 12/31/2018	N
		1/1/2019 - 1/31/2019	N
		2/1/2019 - 2/28/2019	N
		3/1/2019 - 3/31/2019	
		4/1/2019 - 4/30/2019	

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
CROSS CONNECTION EXEMPTION	3/1/2024	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				

**NOTE:** This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

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CT0290024	CAMP JEWELL-HIDEAWAY			NC	100	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
73 MCCLAVE ROAD				4			

Towns Served: COLEBROOK

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
23104	WELL	2	WELL	A				
48221	CALCITE FILTER							
56038	BOOSTER PUMP							

### Contact Information

Name		Organization		Job Title	
<b>Mr. Harold Sparrow</b>		YMCA Greater Hartford		Ceo	
Mailing Address Line One		Mailing Address Line Two		City	State Zip Code
50 State House Sq.		2Nd Floor		Hartford	CT 06103
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-522-9622		860-522-1314			harold.sparrow@ghymca.org

Contact Role(s): **Legal Contact, Owner**

Name		Organization		Job Title	
<b>Mr. Norman T. Button li</b>		Ghymca		Property Manager	
Mailing Address Line One		Mailing Address Line Two		City	State Zip Code
6 Prock Hill Rd		P.O. Box 8		Colebrook	CT 06021
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-379-2782	217	860-379-8715		315-886-9199	norm.button@ghymca.org

Contact Role(s): **Administrative Contact**

#### Please note the following:

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

***If you have any questions, please contact the Drinking Water Section at (860) 509-7333.***

***<http://www.ct.gov/dph/publicdrinkingwater>***

***End of schedule***

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0290044	COLEBROOK TOWN HALL COMPLEX			NC	25	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
559 COLEBROOK-WINSTED ROAD				1			
Towns Served: COLEBROOK							

### Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate (1040)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Nitrite (1041)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
20539	WELL	2	WELL	A				

### Contact Information

Name				Organization		Job Title		
Mr. Thomas D. McKeon				Town of Colebrook		First Selectman		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
562 Colebrook			P. O. Box 5			Colebrook	CT	06021-0005
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-379-3359	202	860-379-7215		860-738-0850	TOMMCKOEN@COLEBROOKTOWNHALL.ORG			

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
<b>CT0290044</b>	<b>COLEBROOK TOWN HALL COMPLEX</b>	<b>NC</b>	<b>25</b>	<b>L</b>	<b>GW</b>
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
559 COLEBROOK-WINSTED ROAD			1		
Towns Served: COLEBROOK					
Contact Role(s): <b>Administrative Contact, Legal Contact</b>					
Name		Organization		Job Title	
<b>Colebrook</b>					
Mailing Address Line One		Mailing Address Line Two		City	State
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
Contact Role(s): <b>Owner</b>					

**Please note the following:**

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

***If you have any questions, please contact the Drinking Water Section at (860) 509-7333.***

***<http://www.ct.gov/dph/publicdrinkingwater>***

**End of schedule**

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0290054	COLEBROOK CONGREGATIONAL CHURCH			NC	25	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
471 SMITH HILL ROAD				1			
Towns Served: COLEBROOK							

### Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Water System Facility: **ENTRY POINT (WSF ID: 00700)**

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		

### Other Compliance Schedules

<i>Compliance Schedule Activity</i>	<i>Due Date</i>	<i>Achieved Date</i>
RESPOND TO SANITARY SURVEY	3/2/2019	

### Public Notification Requirements

<i>Violation/Situation</i>	<i>Compliance Period</i>	<i>Notice Tier</i>	<i>Public Notification</i>		<i>PN Certification</i>	
			<i>Required</i>	<i>Performed</i>	<i>Due to DPH</i>	<i>Received</i>
E. Coli	4/1/18 - 6/30/18	3	8/29/2019		9/8/2019	

### Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
20540	WELL	2	WELL	A				

### Contact Information

Name		Organization		Job Title		
Pastor Steven P Blackburn		Colebrook Congregational Churc		Pastor		
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
564 Colebrook Road				Colebrook	CT	06021

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## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name				Classification	Population	Owner Type	Primary Source	
CT0290054	COLEBROOK CONGREGATIONAL CHURCH				NC	25	P	GW	
Local Address (where applicable)				Service	Residential	Commercial	Industrial	Combined	Agricultural
471 SMITH HILL ROAD				Connections		1			
Towns Served: COLEBROOK									
Business Phone		Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
860-238-7633					860-841-2325	steven.p.blackburn@hotmail.com			

Contact Role(s): **Administrative Contact, Legal Contact**

**Please note the following:**

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0290144	NORBROOK FARM BREWERY			NC	87	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
204 STILLMAN HILL RD				1			
Towns Served: COLEBROOK							

### Monitoring Requirements

**Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)**

Total Coliform (3100)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

Physical Parameters (PPS)	1 routine (RT) per quarter		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

**Water System Facility: ENTRY POINT (WSF ID: 00700)**

Nitrate And Nitrite (NOX)	1 routine (RT) per year		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/19 - 12/31/19		
	1/1/20 - 12/31/20		

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
61284	WELL #1	2	WELL #1	A				

### Contact Information

Name		Organization			Job Title		
<b>Mr. John Auclair</b>		Positive Ground, LLC					
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
299 Stillman Hill Rd					Norfolk	CT	06058
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
860-488-2959				860-488-2959	jauclair@norbrookfarm.com		

Contact Role(s): **Administrative Contact, Legal Contact, Owner**

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1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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